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Epididymitis

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What is epididymitis?

Epididymitis ("eh-pi-dih-duh-mi-tis") is an infection of the epididymis, which is the small cord-like structure adjacent to the testicle.

What are the symptoms of epididymitis?

- scrotal pain
- swelling of one testicle
- liquid discharge from the penis
- painful urination
- urine that is cloudy or blood-tinged
- fever and chills



What causes epididymitis?

Epididymitis is caused by an infection. In men under age 35, it is more often caused by sexually-transmitted bacteria, such as Chlamydia or gonorrhea. In men over 35, it is more commonly an infection by bacteria located around the prostate gland. Men who have recently undergone a vasectomy may also experience an infection of the epididymis, but this is very uncommon.

Who gets epididymitis?

Any man can get epididymitis, but those at higher risk are those who have a urinary tract (ie. bladder) infection, sexually-transmitted disease or prostate infection. Men who have had their urinary tract instrumented, as in surgery, are also at risk.

How is epididymitis diagnosed?

A history of the above listed symptoms is suggestive of epididymitis, especially if there are risk factors, as mentioned. A urinalysis is necessary to make the diagnosis and obtain a specimen for culture. In some cases, an ultrasound exam is done to verify that the swelling of the epididymis is not due to some other reason, such as a testicular cancer.

Because sexually-transmitted bacteria are often involved, you should be screened for these by having cultures done. Since they are contagious, you should also ask your sexual partner/s to be screened as well.

What is the treatment?

Antibiotics are usually all that is necessary to eliminate the infection, although it may take 2-3 weeks of medicine to complete the treatment. Non-steroidal anti-inflammatory drugs, such as MotrinTM and aspirin, can be helpful in relieving the pain and swelling. Ice packs may be comforting, especially

early in the infection. Taking it easy for a few days is

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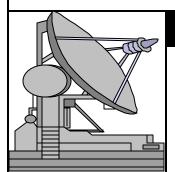
often necessary. Surgery is rarely needed to treat this problem.

For what reasons should I follow-up, call the clinic, etc.?

Although it may take several days or a few weeks for the swelling and discomfort to fully go away, you should begin to feel better within a few days. You should be re-evaluated in the clinic if your fewers do not go away despite therapy after 72 hours.

It is important that you complete your entire course of antibiotics, even if your symptoms are gone before the entire prescription is finished. Cutting your antibiotic regimen short may allow the infection to re-kindle, and it may come back stronger than before.

You should avoid any sexual intercourse until after the infection has cleared.



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Medical Center, Ft. Gordon, GA.
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This Patient Information

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